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## \*BIBDATASHEET\*

CONFIRMATION NO. 8519

Bib Data Sheet

SERIAL NUMBER 10/045,579	FILING DATE 11/07/2001  RULE	CLASS 422	GROUP ART UNIT 1753	ATTORNEY DOCKET NO. DP-304144
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/249,231 11/16/2000 *me*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*more* *me*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/19/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	MI	6	39	2
Examiner's Signature <i>[Signature]</i>	Initials			

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## TITLE

Edge-connected non-thermal plasma exhaust after-treatment device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )